

MICHIGAN DEPARTMENT OF COMMUNITY HEALTH

Request for Information Guidance Document (RFI) Phase I

Strategic Prevention Framework State Incentive Project Grants

Date of Issuance:

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Office of Drug Control Policy:**

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Section I - Application Process Overview

In October of 2004, the Substance Abuse and Mental Health Services Administration's Center for Substance Abuse Prevention (SAMHSA/CSAP) awarded a Strategic Prevention Framework State Incentive Grant (SPF/SIG) to the Michigan Department of Community Health Office of Drug Control Policy (MDCH/ODCP). The grant permits approximately \$11.75M to be invested in our state over five years to achieve the following federal goals: build prevention capacity and infrastructure at the state and community levels; prevent the onset and reduce the progression of substance abuse including childhood and underage drinking; and reduce substance abuse-related problems in communities.

Michigan is in its third program year of the SPF/SIG Project. The initial work has resulted in a statewide review of data and resources and CSAP approval of a Michigan SPF/SIG Strategic Plan emphasizing the data supported priority problem, *Alcohol-Related Traffic Crash Deaths*. Underage drinking, cultural competency, and sustainability must also be incorporated in the implementation. This framework represents the way state funded prevention services will be conducted in the future. ODCP requires all Coordinating Agencies (CAs) to participate in this SPF/SIG effort.

Michigan's strategic plan outlines two community level implementation phases:

Phase I represents the completion of regional needs assessment activities, strategic community planning and selection of a target community or population. To launch the SPF/SIG at the community-level, ODCP is issuing this Request for Information (RFI) Phase I Application. The application is ODCP's mechanism for authorizing Phase I funding to CAs to administer the grant, convene the Community Epidemiological Workgroups (CEWs) and Community Strategic Prevention Planning Collaboratives (CSPPCs), conduct a needs assessment and develop a SPF/SIG Community Strategic Plan. The priority problem, *Alcohol-Related Traffic Crash Deaths*, must be addressed by all CAs. The parallel state and federal initiative is the reduction of underage drinking. As such, underage drinking must be included as part of the priority problem whenever there is local supporting data

Phase II will represent implementation of community prevention strategies consistent with the SPF/SIG Community Strategic Plan. Funding for Phase II will be authorized upon ODCP approval of the CA Phase I deliverables (a Needs Assessment Summary and Community Strategic Plan) and approval of the CA Phase II Application. The Phase II Application will be expected to describe implementation and evaluation associated with the Community Strategic Plan. Phase II Application guidelines and instructions will be issued under separate cover by Wednesday, May 30, 2007. It is expected that Phase II funding will be available during FY07 for those CAs that complete the requirements of Phase I.

A. Phase I Application, Deliverables and Due Dates

The Application for Project Management and Phase I Activity must include the following components:

1. Project Management that spans Phase I activity;
2. The Plan for Needs Assessment;

3. The Plan for Establishing the CEW and the CSPPC; and
4. Budget Detail and Justification.

During Phase I, the CAs are expected to produce two deliverables for submission to ODCP:

- 1) A Needs Assessment Summary; and
- 2) A Community Strategic Plan.

The Phase I Application is due Monday, April 30, 2007. ODCP intends to review CA plans, provide a plan approval and/or comments, identify and follow-up on areas needing clarification or revision and issue the necessary allocations and contract amendments by Wednesday, May 30, 2007. A meeting to review application requirements and answer questions is scheduled for **Thursday, April 5, 2007; 9:30 am to 12:30 pm; at the Capitol Commons Center, 400 S. Pine Street, Lansing, MI., Conference Room A and B.** During the application process, CAs may direct questions to Larry Scott, SPF/SIG Project Director. Application approvals and associated allocations will be delayed for individual CAs if it is necessary for their Phase I plans to be revised or further developed.

The Phase I Deliverables are due August 31, 2007. It is recognized that some CAs will be able to submit the Phase I deliverable sooner than August 31st and others will need additional time. If the CA does not expect to be able to submit Phase I deliverables by August 31st, an extension may be requested in the application. When submitting a Project Management plan for Phase I, it is important that CAs provide realistic dates for producing deliverables.

For Phase I deliverables submitted by Friday, August 31, 2007, ODCP intends to review the Needs Assessment Summary and the Community Strategic Plan and approve CA transition to Phase II activity by October 1, 2007. Phase I deliverable submissions received after Friday, August 31, 2007, will be reviewed and approval or other response will be provided within 30 days of receipt.

B. Transmittal Instructions

Phase I Application Submission

The CAs must submit a single Microsoft Word document no later than Monday, April 30, 2007, to the attention of Sandra Bullard at: bullards@michigan.gov with a copy to foxallc@michigan.gov.

The Phase I application must include the name of the CA, a working title for the SPF/SIG project, and a contact person, telephone number and e-mail address for application related questions. The application must include a table of contents with page numbers; the narrative must include headings, which correspond to the application requirements and include consecutive page numbers. The application narratives should not exceed ten pages. The page limitation does not include attachments.

Phase I Deliverables

The CA must submit a separate Microsoft Word document for each of the two Phase I Deliverables – the Needs Assessment Summary; and the Community Strategic Prevention Plan. The documents must be sent to the email addresses listed above. The Needs Assessment Summary and the Community Strategic Plan must include a table of contents with headings. Required narratives must not exceed 25 pages. The page limitation does not include attachments.

C. Project Funding

For the duration of the project (both Phases I and II), **\$1.6M** statewide is available to CAs for project management functions. Project management includes *administrative* costs, such as staffing, costs associated with convening the CEW and CSPPC and associated meetings. Project management does not include conducting a needs assessment.

Additionally, up to **\$1.3M** is available for Phase I activities such as conducting the needs assessment, development of the Community Strategic Plan through the CEW, distribution/publication of the needs assessment and Community Strategic Plan, local training and technical assistance, and fulfilling other Phase I requirements.

A limited amount of funding (**\$320,000**) is reserved for CAs needing to build capacity prior to being able to implement the SPF/SIG process. This could range from building partnerships to collecting community data. Requests for such funding must be incorporated in the Phase I application and separately identified as needed for local capacity building.

The following requirements for project funding including restrictions, limitations, allowable expenditures, related reporting and procurement apply:

1. Reimbursement for project expenditures will be through the prepayment process in the current MDCH/CA agreement. Please note that prepayments will not be effected (increased) until after the SPF/SIG Phase I amendment has been executed.
2. Expenditure reporting will be on the Revenues and Expenditures Report (RER) in the current MDCH/CA agreement, amended to indicate the SPF/SIG award. A dedicated SPF/SIG column must be used. Prepayments and year-end reconciliations will be tied to the RER. In addition, CAs will need to report final Phase I expenditures against the budget categories in the Program Budget forms attached to this RFI.
3. Budget expenditure categories (line items) are subject to a deviation allowance of 15% at the discretion of the CA. That is, actual final Phase I expenditures for each expenditure category may be plus-or-minus 15% of the approved budget category.
4. If budget revisions in excess of the allowed deviations are needed, the CA must submit a written request, with justification, to its contract manager, in advance.
5. Indirect costs may be charged to the project only if the CA has submitted a Central Cost Allocation Plan Certification, per Attachment B of the MDCH/CA agreement.

6. There are no local match requirements for this project. A project award does not increase the CA's match obligation, nor are special matching funds required as a condition of an award.
7. Project funds cannot be used to supplant current funding of existing activities.
8. None of the funds can be used to pay the salary of an individual at a rate in excess of \$175,000 annually.
9. "Confidentiality of Alcohol and Drug Abuse Patient records" regulations (42 CFR 2) are applicable to any information about alcohol and other drug abuse patients obtained by a "program" if the program is federally assisted in any manner.
10. Awardees must maintain records that adequately identify source and application of SPF-SIG project funds.
11. Grant funds may not be used to pay for the purchase or construction of any building or structure to house any part of the project.
12. During Phase I, CAs may choose to purchase consultant services related to needs assessment, capacity assessment, and strategic planning. For this project, MDCH does not require competitive procurement of such consultant services, since they are expected to be of relatively low cost and brief duration. Costs must be allowable per criteria in OMB Circular A-87 or A-122 as applicable.

D. Plan Approval and Funding Criteria

Decisions to approve and allocate funds for Phase I activity under this project will be based on CA compliance with submission requirements. Plans will be reviewed for: 1) consistency with SPF/SIG principles; 2) incorporation of the information and requirements provided in this document with regard to the role and functions of the CEW and CSPPC; 3) a logical connection between strategic activities and outcomes that lead to the required deliverables; and 4) reasonableness of budget and the availability of funds (See Section II: Phase I Application Requirements).

ODCP will assist communities that do not meet the application requirements. Any Phase I applicants that do not meet minimum submission requirements will have the opportunity to re-submit their applications for subsequent approval and funding allocation. TA will be available and provided in a manner that is expeditious to the process.

Section II - Phase I Application Requirements

Please note the following specific requirements for each of the Phase I Application components:

A. Project Management and Staffing

Project management costs include: administrative needs; coordination of tasks and timelines; convening the CEW and CSPPC; writing the Phase II application; associated meetings and responsibilities to ensure project success. It does not include the cost of conducting a needs assessment, its summary compilation or development of the Community Strategic Plan.

Submission Requirements

- Description of the CA administrative infrastructure that will be supporting the SPF/SIG project
- Description of the roles of key staff involved in the SPF/SIG effort. A SPF/SIG project manager must be identified and the project manager's reporting relationships to the CA director and prevention coordinator;
- Explanation of how the SPF/SIG project will impact or affect other CA prevention programming;
- Description of how the CA expects SPF/SIG partnerships, process and concepts would be sustained beyond the life of the current grant;
- Provision of a timeline for carrying out Phase I activities, showing key activities, milestones, and responsible staff. Timelines must include prospective dates for hiring or contracting for staff as appropriate, target dates for completing Phase I Deliverables, target dates for identifying and recruiting CEW and CSPPC members; and
- Anticipated training and/or technical assistance needed to successfully implement the SPF/SIG Phase I. (*Note: Training, via CCAPT will be offered to ODCP and its designees [e.g. CAs, SPF/SIG Advisory Committee (SAC), and workgroups]*).

For additional guidance, please see **Section V: Explanation of SPF/SIG State and Community Roles and Responsibilities, Role of the CA, in this document.**

B. Plan for Needs Assessment

Submission Requirements

The CA must submit the plan for completing the Needs Assessment Summary deliverable including:

- A description of planned activities;
- Provision of a timeline for carrying out Needs Assessment related activities showing key activities, milestones, responsible staff/individuals;
- Description of the expected role of the CEW in these activities;
- An identification of how information and data from minority populations will be incorporated in the needs assessment; and

- Identification of any requests for technical assistance or training needed to successfully complete the Needs Assessment Summary.

To assist CAs in developing their application, the following additional information is provided:

The needs assessment planning process is intended to result in a profile of population needs, resources and readiness to address the identified priority problem – Alcohol-Related Traffic Crash Deaths and underage drinking - as well as gaps in service delivery. The process must actively involve the CEW in data review, recommendations for how to interface with Alcohol-Related Traffic Crash Deaths and underage drinking, selection of target population(s) and/or geographical “hot spots” and recommendations for any other community priority.

The needs assessment process should include use of the following documents and activities:

- Use of Available *Data Sources for Community Needs Assessment* for the SPF/SIG as compiled by the SEW and provided as an attachment to the SPF/SIG [Guide for Michigan Communities](#);
- Assessment of populations including underage drinkers involved in *Alcohol-Related Traffic Crash Deaths*;
- Use of SEW developed Logic Models which are incorporated as attachments to the SPF/SIG [Guide for Michigan Communities](#) (to determine intervening variables and create evidence-based strategies); and
- Analysis of community assets, resources, gaps, capacity and readiness to act.

Special Considerations

CAs who have already conducted a needs assessment of the Alcohol-Related Traffic Crash Deaths and underage drinking and/or developed a related Community Strategic Plan that is consistent with this RFI application should contact Larry Scott for review of these products and consultation before submitting their Phase I application.

C. Plan for Establishing a CEW and the CSPPC

CEW Submission Requirements:

The CA must submit its plan for establishing one CEW whose responsibilities will be to incorporate a consensus of the entire CA region and a rationale for recommending the selection of a target community to impact the priority problem. The plan should reflect the roles and membership outlined in Section II. The following items must be included in the submission.

- A plan, including a timeline, for convening and utilizing the CEW in the needs assessment process. This timeline should include target dates for identifying and recruiting members, convening meetings, assessing training and technical assistance needs for completing needs assessment summary, selecting the community of impact, and organizing the community key leaders and stakeholders. The plan should reflect short-term and long-term goals and allow flexibility for membership expansion as the project evolves;
- A list of CEW membership distinguishing between proposed and known members;

- Description of the expected role of the CEW during both Phase I and Phase II;
- Description of the criteria that the CA will use in determining CEW membership;
- Note, membership must reflect partners and stakeholders who are community leaders, providers, service recipients or benefactors of effective prevention. (See: Attachment A – A [*Guide for Michigan Communities*](#) for membership specifics);
- Evidence of a mechanism for ensuring that cultural competency will be infused into the CEW planning and related activity. Examples of such mechanisms are: Representation from respective underserved cultural groups or a representative multi-cultural group within a targeted community. A memorandum of understanding (MOU) stating how diverse groups will identify issues and share information. Examples of how cultural competency can be infused are: A cultural competency policy that recognizes that cultural groups are present, complex and ever-changing and a commitment to address data, group and personal identities. (See: Attachment A – A [*Guide for Michigan Communities*](#) document);
- Request for technical assistance to build capacity to fulfill Phase I CEW activities including topic area, learning objectives, target audience, target dates, number of participants, and trainers, if known, etc.

CSPPC Submission Requirements:

The CA must submit its plan for establishing a CSPPC representing the target community/population, recognizing the community has not yet been identified.

- A general description of the plan to convene and implement the CSPPC for the strategic planning process;
- The proposed timeline including target dates for identifying and recruiting members, convening meetings, target dates for assessing training and education needs, target date for organizing the community for the development of a Community Strategic Plan, and target date for completing this plan;
- The plan for recruiting members or developing the CSPPC. The CSPPC membership should be reflective of community-level stakeholders, leaders and partners invested in prevention including Native American Tribes and other underserved populations within the targeted area;
- Description of expected role for the CSPPC during Phase I;
- Description of the process the CSPPC will use to conduct community-level assessment of risk and protective factors (intervening variables);
- Description of how the CSPPC will assist the CA in building and mobilizing capacity at the target community level;
- Describe how the CSPPC will provide input to the CA in the development and submission of a culturally competent Community Strategic Prevention Plan; and
- Requests for technical assistance to build capacity to fulfill Phase I CSPPC activities including topic area, learning objectives, target audience, target dates, number of participants, and trainers if known.

For additional guidance please see: **Sections IV & V: Explanation of SPF/SIG State and Community Roles and Responsibilities, Role of the CEW and Role of the CSPPC** in this document. Please also see *A Guide to Michigan Communities* - Attachment A of this document.

Section III - Budget Detail and Justification for Phase I Activity

The budget requirements in this RFI apply to Phase I only. The Phase I budget must be inclusive of all planned Phase I activity, and should not be split out by fiscal year (if Phase I will cross fiscal years). Separate budget detail and justification must be provided for each component of the application—Project Administration and Management, Needs Assessment, Strategic Planning and Initial Capacity Building.

General instructions

1. The project budget request must be submitted using the three budget forms as below:
 - [Attachment B-1](#) - Cost Detail Schedule;
 - [Attachment B-2](#) - Program Budget Summary; and
 - [Attachment B-3](#) - Program Budget Summary Addendum (Planned Expenditures by Agency and Project Activity).
2. Each budget expenditure category must be described and justified in a budget narrative. The narrative must be organized so as to clearly indicate which category is being described and justified. The narrative must also provide a rationale for the proposed allocation of funds for needs assessment, strategic planning, and training, respectively.
3. The Budget Cost Detail Summary, item 5, asks for the identification of each proposed subcontractor. On the budget narrative, be sure to clearly describe each subcontractor's role(s) and responsibilities. Please indicate the amount of project funds to be awarded to each subcontractor, and provide justification for the amount as needed.
4. In compliance with conditions of the SPF/SIG award to MDCH, not more than \$1,600,000 of project funds can be retained at the CA level, statewide, for project management, for the duration of the project. For this reason, ODCP will track CA budgets and expenditures. All funds except funds shown on the PBS, line 5, Contractual (and box 5 of the Cost Detail Schedule), are considered to be CA funds, and are subject to this limitation. Project management includes *administrative* costs, such as staffing, costs associated with convening the CEW and CSPPC and associated meetings and indirect costs if allowed. Project management does not include conducting a needs assessment.

Section IV - Description of Phase I - Deliverable Requirements

A. Needs Assessment Summary

Submission Requirements

The CA Needs Assessment Summary must include the following:

- A regional assessment of the magnitude and severity of the *Alcohol-Related Traffic Crash Deaths* and underage drinking, as well as, other primary substance abuse-related problem and related health and social conditions in the region;
- An assessment of regional level and target communities intervening variables (risk and protective factors) associated with the primary substance abuse problem and related health and social conditions;
- Identification and assessment of regional capacity and gaps in capacity to address the primary substance abuse problem and related health and social conditions;
- Identification of target communities for strategic prevention framework implementation; and
- Plan for mobilizing capacity to address needs including the engagement of key leaders and stakeholders of the CSPPC.

For additional guidance see: **Section V - Explanation of the State and Community Roles and Responsibilities, the Role of the CSPPC and the [Guide for Michigan Communities](#) document -Attachment A of this document.**

B. Community Strategic Plan

Submission Requirements:

The CA Community Strategic Plan must contain the following:

- Identification of the priority problem(s) to be addressed;
- A description of the purpose of the proposed SPF/SIG Community Strategic Plan;
- Relationship of this project to other CA and community prevention activities;
- A description of the community to be impacted including demographics, geography etc.;
- A description of how the needs assessment was used to select evidence based programming policies and practices to be implemented and how they were selected;
- A description of how the Community Strategic Plan will address population-based and community level change;
- A description of capacity and resources needed for the plan including a detailed budget;
- A description of training needs;
- A description of barriers to implementing the Community Strategic Plan and how these barriers will be addressed;
- A description of the collaborative relationship among community partners and stakeholders and how to these community partners contributed to the Community Strategic Plan effort, (e.g., joint planning, sharing of resources, joint training, joint funding, memoranda of understanding);
- A plan for the application of cultural competency in the development and implementation of the plan; and
- A description of desired community-level Community Strategic Plan outcomes including timelines and milestones.

For additional guidance see: **Section II: Application Requirements, Section V: Explanation of SPF/SIG State and Community Roles and Responsibilities, Role of the CSPPC and the A [Guide for Michigan Communities](#) in Attachment A of this document.**

Section V - Explanation of SPF/SIG State and Community Roles and Responsibilities

A. Role of State Staff (ODCP)

The role of the state is to develop, monitor and maintain infrastructure to implement the SPF/SIG including:

- Maintaining workgroups including the SAC, SEW, IG, Childhood and Underage Drinking Workgroup (CUAD), as well as establishing additional workgroups such as SPF/SIG Request for Proposal Workgroup (RFP), and Evaluation Workgroup, (incl. preparing and delivering workgroup training);
- Providing training and technical assistance to CAs and communities delineating SPF/SIG goals, objectives and structure; arranging learning communities; and arranging staffing for SPF/SIG requirements for state level implementation;
- Identifying state level priority substance abuse-related problems, resources and gaps in data systems and prevention services, as well as assess state level intervening variables; profiling state level population needs; assessing resources and readiness to address needs and gaps; creating tools for marketing the SPF/SIG to state and community level stakeholders;
- Mobilizing state level capacity to implement SPF/SIG through: an inventory of human, financial and data resources; dissemination of knowledge of such capacity; the provision of technical assistance in building capacity to SPF/SIG communities; coordinating administrative planning; and leveraging resources and funding prevention services across state systems;
- Developing the state level strategic plan and the dissemination of the plan to communities for local application and action;
- Implementing a culturally competent state level plan, including dissemination of funding and guidelines for initial community level needs assessments and community strategic plans, professional development and technical assistance to community stakeholders; developing a request for community implementation plans, review, and selection processes for community level execution of SPF/SIG steps;
- Monitoring and evaluating SPF/SIG activity and disseminating knowledge of what works to the communities.

B. Role of the CAs:

For purposes of the SPF/SIG project, CAs will be responsible for:

- Organizing and convening the CEW and CSPPC partners and stakeholders for the purpose of implementing the SPF/SIG principles and related efforts implemented at the community level;
- Fostering a community-wide and community-based collaborative among stakeholders and partners committed to addressing the priority problem;
- Administrative activities and project management of SPF/SIG funds including:

- Contracting and funding local training and technical assistance recommended by the CEWs and CSPPCs; Selecting and contracting with provider networks to be implemented in the targeted communities;
 - Assisting the SPF/SIG Evaluator in providing data services and technical assistance to programs reporting capacity, process and outcome data;
 - Monitoring CEW, CSPPC and provider progress;
 - Preparing and submitting required financial and programmatic reports on SPF/SIG program activity per contract requirements.
- CAs will be required to convene a CEW that will conduct a region wide community-level needs assessment utilizing local data and data derived from the State Epidemiological Workgroup;
 - CA will be required to submit a **Needs Assessment Summary** including *Alcohol-Related Traffic Crash Deaths* and underage drinking to MDCH/ODCP for approval;
 - CA will also have the option of submitting an additional priority problem for impact to MDCH/ODCP for approval. For specific requirements for submitting an additional priority problem, please see **Section I: Phase I Application Deliverables, and Due Dates: A. Needs Assessment Summary** of this document;
 - Upon completion of the Needs Assessment Summary, the CA will convene, coordinate and partner with a CSPPC consisting of local-level stakeholders from the targeted community identified in the needs assessment process. A CA consisting of a single county or a single municipality should consider using an existing active substance abuse collaborative as the CSPPC if it meets membership and other CSPPC criteria. The CA may also opt to invite the existing organization to be part of a larger collaborative effort and augment its membership to be inclusive of the entire catchment area. Examples of existing collaboratives include: active Drug Free Communities Grantees, Office of National Drug Control Policy (ONDCP) 25 City Project Participants, Multi-Purpose Community Collaboratives, or other active substance abuse coalitions as the CSPPC;
 - CAs will work in collaboration with CSPPCs to develop a community-level and culturally competent Community Strategic Plan;
 - CAs must submit a SPF/SIG Community Strategic Plan to ODCP with documented input of the CSPPC;
 - Upon approval of the SPF/SIG Community Strategic Plan concept by ODCP, the CA will submit a SPF/SIG Implementation and Evaluation Plan to ODCP requesting funding.

C. **Role of the Community Epidemiology Workgroup (CEW)**

- The CEW membership should include, but not be limited to, representatives from: Prevention, Treatment, Public Health, Criminal Justice Education, Community Mental Health, Epidemiology, Research/Statistics, existing Drug Free Community Coalitions and other current coalitions and agencies including those representing underserved populations.
- The CEW should include, but not be limited to: an epidemiologist from a local university and/or college, a CA executive director; a CA prevention coordinator; prevention providers; a CA data specialist; a Safe and Drug Free Schools and Communities representative; a local Department of Human Services representative; a local law

enforcement representative; a local Department of Corrections representative; a liaison representative from the Michigan Coalition to Reduce Underage Drinking; community leaders; prevention consumers and a representative from key community coalitions, i.e., Drug Free Communities Support Grantees.

The CEW will assist the CAs in the performance of the following functions:

- Assessing data indicators pertaining to the burden of substance abuse and the state level priority problem: Alcohol-Related Traffic Crash Deaths;
- Conduct a community-level needs assessment utilizing local data and data derived from the SEW;
- Assessing the various data and information gaps within the region;
- Assessing capacity, resources, community readiness and political will to address the state level priority problem within high need communities;
- Utilizing outcomes from the needs assessment to profile regional populations in order to identify and recommend communities of impact.

Identification of communities of impact is predicated on the data and could be identified as the entire region (if a CA consists of one or few counties) or one of several high need counties, townships, cities or unique populations including, but not limited to adults or underage populations; and/or race, ethnicity or gender populations within larger regions.

The CEWs role throughout the community SPF/SIG planning, implementation and evaluation steps will be to:

- Facilitate the assessment of intervening variables within high need communities;
- Provide recommendations on strategies for addressing intervening variables and the priority problem for strategic planning;
- Provide recommendations to address data and system gaps, as well as for evaluating, monitoring, sustaining and replacing programs, policies and practices within communities.

D. Role of the CSPPCs

CSPPCs organized and convened by the CAs will be responsible for developing strategies, programs and practices that impact the primary substance abuse problem at the community level.

Where feasible, the CSPPCs will be required to include, but are not be limited to, representation from the following prevention partners and stakeholders serving the targeted community: CA Directors, Prevention Coordinators, Drug Free Community Grantees, Alcohol, Tobacco and Other Drug Community Coalitions, Student and Parent organizations, Intermediate School District Safe and Drug Free Community School and Communities Grantees, Local Education Administration, County Department of Human Services Agencies, Michigan Community Collaboratives, Local Public Health Department; Community Mental Health Boards, Older Adult Service Agencies, Faith-Based Communities, Drug Enforcement Agency, High Intensity Drug Traffic Area Agency, Liquor Control Commission, Michigan Coalition to Reduce Underage Drinking, Tobacco and

Alcohol Retailer Associations, and local law enforcement agencies. The CSPPCs will perform the following tasks related to the SPF/SIG:

- Conduct community-level assessment of risk and protective factors (intervening variables), and capacity to implement SPF/SIG infrastructure and related programs, policy and practices;
- Assist the CA in building and mobilizing capacity at the target community level;
- Provide input to the CAs in the development and submission of a community-level and culturally competent Community Strategic Plan to MDCH/ODCP;
- Make recommendations for training and technical assistance to the CA;
- Make recommendations for criteria that could be used in the selection of a SPF/SIG provider agency to CA with the acknowledgement and recognition of the provider panel/requirements applied by CAs;
- Contribute to reports of SPF/SIG efforts at the community level submitted by the CA to the state;
- Participate in the SPF/SIG evaluation as required;
- Attend regularly scheduled meetings;
- Convene relevant workgroups as needed to further the community-level SPF/SIG effort;
- Comply with ODCP Conflict of Interest guidelines to ensure that the CSPPC will include diverse representation and that participants shall not appear to have conflicting interests or unfair advantage.

E. Role of the Community Service Provider (Phase II)

The CAs, with consideration of recommendations from the CSPPCs, will allocate funds, via a bid process, to community service providers that serve the target communities. Providers must have data reporting capability, including the capability to report performance data, e.g., process, capacity and outcome data, and must propose services that meet a specified research-based standard. Community-based providers must meet CA provider requirements such as an appropriate substance abuse program license. Provider selection must meet local procurement requirements and all eligible providers must be allowed to submit proposals for the implementation of the SPF/SIG.

The services performed by the community providers include, but are not limited to, the following:

- Providing or implementing data guided, evidence-based strategies and programs that: a) reduce the use and delay the onset of substance use and abuse, including childhood and underage drinking; and b) reduce primary substance abuse related problems in the communities and c) help build prevention capacity and infrastructure at the community levels;
- Developing and providing such programs in a culturally competent manner;
- Participating in the SPF/SIG community-level evaluation as specified by the CA or SPF/SIG evaluation contractor;
- Assisting in the dissemination, including training and the provision of technical assistance, of successful programs and strategies employed as a result of the SPF/SIG project to the communities served by the coordinating agency;

- Assisting in the dissemination of successful employment of programs and strategies to other CAs and communities across the state including community coalitions, school districts and other stakeholder agencies.

Section VI - SPF/SIG Background Information

The SPF/SIG is a five-year \$11.75M grant awarded by the CSAP. Its hallmark is five steps that constitute the SPF. These include: Step 1 – **Assessment**: Determine assets and needs; Step 2 – **Capacity**: Improve abilities to deliver substance abuse services; Step 3 – **Planning**: Develop strategies for communication and service coordination; Step 4 – **Implementation**: Put strategies into action; Step 5 – **Evaluation**: Document the process and outcomes of implementation.

Currently, Michigan is in its third program year of the SPF/SIG Project. The state has been implementing steps one through three over the past two years. The result of this work has been the identification of Michigan's priorities to address through the SPF as articulated in a state strategic plan. Michigan's selected priority problem is *Alcohol-Related Traffic Crash Deaths*.

The SEW conducted a comprehensive data review during the first year of the SPF/SIG award. In the second project year, the SEW submitted its findings to the SPF/SIG - SAC, IG and MASACA, which resulted in identification of the statewide priority problem. ODCP ratified this action. *Alcohol Related Traffic Crash Deaths* is supported by data that factors in magnitude, severity, and prevalence, and (by stakeholder consensus) was determined to be an issue for which there was readiness, capacity and political will to address. In keeping with this process, communities receiving SPF/SIG funding will be required to address *Alcohol-Related Traffic Crash Deaths* as a priority problem. During the state analysis, nine other data supported problems were identified. Accordingly, communities are permitted to use the needs assessment process to justify *adding* one of these problems or to examine other substances that are of significant concern in their Community Strategic Plan submission to the state.

Other project accomplishments to date include:

- The retention, expansion and enhancement of the SAC for the purpose of providing guidance to the state in its implementation of the SPF/SIG Project;
- The retention and enhancement of the SAC and IG for the purpose of assessing, building and mobilizing capacity at the state level is essential for the implementation of the SPF/SIG.
- The establishment of a SEW that has completed the initial phase of the state needs profile, by defining the burden of substance abuse in Michigan, and identifying and recommending substance abuse related prevention priorities.
- The formation of: an Underage Drinking Workgroup; and a Coalition Workgroup;
- The provision of training to the Advisory Committee, its workgroups, regional coordinating agencies, providers, and coalitions on relevant subjects, including: Developing Culturally Competent Policy; SPF/SIG Infrastructure Development; State and Community Level Capacity Building; Developing an Epidemiological Profile; Developing a State Logic Model; Substance Abuse Programs Administered by the Michigan Department of Corrections; Diversion Programs Administered by the Drug Enforcement Agency; Enforcing Underage Drinking Laws; Designing Prevention Programming for the 0 to 6 Year old Population; and

Evidence-Based Prevention Programs (e.g. the Nurse Family Partnership Program, the Minnesota Smoking Program, etc);

- Successful submission of a state strategic plan to CSAP.

The SPF/SIG provides Michigan with an opportunity to develop and/or enhance community substance abuse support systems, and that, when coordinated, lead to statewide healthy growth and functioning. The appropriate administrative apparatus, partnerships and policies will enable state and local systems to:

- Improve the collection, analysis and availability of data;
- Identify common problems;
- Reinforce service gaps to address problems and populations;
- Engage in state, regional and local planning for a continuum of service delivery;
- Solicit joint funding;
- Develop state and community communication pipelines that yield program efficiency;
- Build evaluation tools that can be tailored to measure short-term and long-term goals.